PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS	

7590

04/06/2005

Law Offices of John D. Gugliotta, PE, Esq. 202 Delaware Building 137 South Main Street Akron, OH 44308

04/26/2005 RFEKADU2 00000012 10613941

01 FC:2501

700.00 DP



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

TERKY LAKOS	(Depositor's name)
Tely Jakos	(Signature)
 4-21-05	(Date)

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/613,941 07/07/2003 Robert E. Norris 1208 6794

TITLE OF INVENTION: EMERGENCY STAIRWAY ESCAPE APPARATUS FOR WHEELCHAIRS

APPLN. TYPE	SMALL ENTITY	ISSUE FI	FEE PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		\$0	\$700	07/06/2005	
EXAL	EXAMINER ART UN		IT	CLASS-SUBCLASS			
LEV, BRUCE ALLEN		3634		182-048000			
			0.E.:				
I. Change of correspondent CFR 1.363).	ce address or indication of "F	ee Address" (3/	•	nting on the patent front page, limes of up to 3 registered pater	. : 10411	D. GUGLIOTTA	
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively, (1) the same of a single from the single from th				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. "Fee Address" indication (or "Fee Address" Indication form registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						L. YORK, III	
3. ASSIGNEE NAME AND	D RESIDENCE DATA TO B	E PRINTED ON T	HE PATEN	Γ (print or type)			
PLEASE NOTE: Unles recordation as set forth i	s an assignee is identified bein 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will apr Γa substitute	ear on the patent. If an assign for filing an assignment.	ee is identified below, the o	document has been filed for	
(A) NAME OF ASSIGN	NEE	(B) RESIDENC	CE: (CITY and STATE OR CO	JNTRY)		
Please check the appropriat			inted on the ;	patent): Individual Co	orporation or other private gr	roup entity Government	
Issue Fee	o enclosed.		<u> </u>	in the amount of the fee(s) is en	closed.		
	small entity discount permitte		Payment by credit card. Form PTO-2038 is attached.				
	of Copies	-	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
5. Change in Entity Statu	s (from status indicated above	e)					
**	SMALL ENTITY status. See		• •	cant is no longer claiming SMA		, _ , , ,	
The Director of the USPTC NOTE: The Issue Fee and I interest as shown by the rec	o is requested to apply the Issu Publication Fee (if required) veords of the United States Pate	ue Fee and Publicat will not be accepted ent and Trademark	tion Fee (if as I from anyon Office.	ny) or to re-apply any previousle other than the applicant; a reg	y paid issue fee to the applic stered attorney or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature _	· 			Date			
Typed or printed name			Registration No				

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.